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SERIAL NUMBER 10/809,975	FILING OR 371(c) DATE 03/26/2004 RULE	CLASS 514	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. ACADIA.035A
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/459,045 03/28/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 07/27/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 2	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>Lee P. Scher</i> <i>SPW</i> Examiner's Signature Initials				

## ADDRESS

20995

## TITLE

Muscarinic M1 receptor agonists for pain management

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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